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## TRANSMITTAL FORM

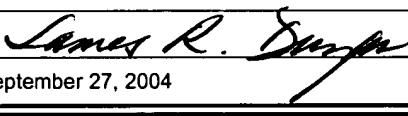
(to be used for all correspondence after initial filing)

	Application Number	10/624,332
	Filing Date	July 22, 2003
	First Named Inventor	David R. Hembree
	Group Art Unit	2812
	Examiner Name	A. Roman
	Attorney Docket Number	2269-3592.8US (97-0321.08/US)

## ENCLOSURES (check all that apply)

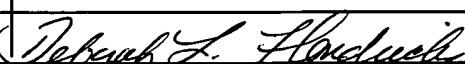
<input checked="" type="checkbox"/> Postcard receipt acknowledgment (attached to the front of this transmittal) <input checked="" type="checkbox"/> Duplicate copy of this transmittal sheet in the event that additional filing fees are required under 37 C.F.R. § 1.16 <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Response to Restriction Requirement/Election of Species Requirement dated <input checked="" type="checkbox"/> Amendment in response to office action dated June 25, 2004 <input type="checkbox"/> Amendment under 37 C.F.R. § 1.116 in response to final office action dated <input type="checkbox"/> Additional claims fee - Check No. in the amount of \$ <input type="checkbox"/> Letter to Chief Draftsman and copy of FIGS. with changes made in red <input type="checkbox"/> Transmittal of Formal Drawings <input type="checkbox"/> Formal Drawings ( sheets)	<input type="checkbox"/> Information Disclosure Statement, PTO/SB/08A (08-00); <input type="checkbox"/> copy of cited references <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement; PTO/SB/08A (08-00); copy of cited references and Check No. 6694 in the amount of \$180.00 <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> Petition for Extension of Time and Check No. in the amount of \$ <input type="checkbox"/> Petition <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Assignment Papers (for an Application)	<input checked="" type="checkbox"/> Terminal Disclaimer To Obviate A Double Patenting Rejection Over a Prior Patent and Check No. 20884 in the amount of \$110.00. <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
The Commissioner is authorized to charge any additional fees required but not submitted with any document or request requiring fee payment under 37 C.F.R. §§ 1.16 and 1.17 to Deposit Account 20-1469 during pendency of this application.		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	James R. Duzan	Registration No. 28,393
Signature		
Date	September 27, 2004	

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